2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# N00000007675

Entity Name: NEWLION FOUNDATION, INC.

Current Principal Place of Business:

ATTN: GARRY W. JOHNSON
110 SE 6TH STREET 15TH FLOOR
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

ATTN: GARRY W. JOHNSON
110 SE 6TH STREET 15TH FLOOR
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 31-1744490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, GARRY W ESQ
C/O TRIPP SCOTT PA
110 SE 6TH STREET 15TH FLOOR
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JOHNSON, GARRY W
Address: 110 SE 6TH STREET 15TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D ( ) Delete
Name: JOHNSON, SUSAN
Address: 110 SE 6TH STREET 15TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D ( ) Delete
Name: BACHELOR, INGRID
Address: 10235 W. SAMPLE RD., STE. 205
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D ( ) Delete
Name: TRIPP, NORMAN D
Address: 110 SE 6TH STREET 15TH FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARRY W JOHNSON D 04/26/2005
Electronic Signature of Signing Officer or Director — Date